## Book reviews

The Biology of the Parasitic Spirochaetes. Edited by Russell C. Johnson, 1976. Pp. 402. Academic Press, New York

This attractive, beguiling, slim volume of 402 glossy pages in typescript reproduction arises from the First Symposium on the Biology of the Parasitic Spirochaetes held in Minneapolis, Minnesota, in June, 1975, which was convened by its editor, Professor Russell C. Johnson with the support of the National Institutes of Health. This symposium was the first of two held during the year to consider the spirochaetes in the widest sense (the other symposium, on leptospirosis, leptospira, and other spirochaetes, was held in Bucharest, Rumania, in September, 1975), and a number of the participants attended both meetings. The two symposia were intended to cross-fertilize ideas and draw parallels from those working with leptospiras, borrelia, and treponemes.

The sectional headings of this book include morphology; cultivation, composition and physiology, and classification of spirochaetes—and their epidemiology; laboratory diagnosis; pathogenesis; immunity; and treatment and control aspects of the spirochaetoses. There is at least one contributor for each of the three main genera in each section.

The chapters particularly concerned with pathogenic treponemes describe investigations into tissue culture of T. pallidum by T.S. Fitzgerald, J. N. Miller, J. A. Sykes, and R. C. Johnson (a combined study between Minneapolis and Los Angeles); a comparison (with photographs) of infection by pathogenic treponemes in animals by P. H. Hardy (Baltimore); the epidemiology of all three main groups by R. R. Willcox (London) and that of treponematoses in particular by J. H. Blount and King K. Holmes (including data referring to a recrudescence of yaws in parts of the Americas); laboratory diagnosis particularly of syphilis by A. Balows and colleagues (Center for Disease Control, Atlanta); the pathogenesis of syphilis and related treponematoses by John M. Knox and colleagues (Houston); the immunological responses, particularly in rabbit syphilis, by M. Metzger (Poland); the treatment of syphilis by N. J. Fiumara (Boston) and that of the endemic treponematoses by J. C. Cutler (Pittsburg).

It is evident that there are many physical and biological differences between the three groups of spirochaetes which have pursued parallel or interlocking courses in man and animals and have resulted in widely divergent disease syndromes, methods of transmission—including animal and insect involvement, and resultant methods of control. Their combined consideration therefore makes a somewhat uneasy amalgam. For example, if promiscuous sex should be eschewed or approached warily to prevent syphilis, so should, by inference, the healthy alternatives of swimming in open water—which until recently was responsible for almost every outbreak of leptospirosis in the U.S.A.—and scouting; as recent outbreaks of relapsing fever there have involved individuals camping in log cabins on the North Rim of the Grand Canyon in Arizona!

Nevertheless the imaginative experiment this book represents has been a success and the volume should be made available on the library shelf for reference and purchased by many individuals in each of the three fields for the great mutual interest it contains. R. R. Willcox

## Introducing WHO.

1976. Pp. 88, illus. World Health Organization, Geneva, Switzerland (Sw. Frs 10)

This is a well produced paper-covered brochure profusely illustrated with photographs and diagrams, and aimed at the general reader. It reviews the progress, structure, scope, and activities (including publications), methods of working and relationship to other United Nations Agencies of the World Health Organization since its conception at the United Nations Conference in San Francisco in 1945, and inception in Geneva in 1948.

International cooperation in the field of health is considered to have begun at the first International Sanitary Conference in 1851 concerned with harmonizing vexatious and costly maritime quarantine requirements and later with yellow fever, cholera, and plague. A permanent bureau and secretariat was not, however, established in Paris until 1908 with a 'permanent' committee of senior public health officials of member governments—the Office International d'Hygiene Publique (OIHP). This body administered the Brussels Agreement relating to venereal diseases in sailors from its formulation in 1924 until these duties were assumed by WHO (paradoxically not mentioned in the introductory chapter).

From these beginnings WHO has grown indeed. By 1974 the effective working budget was US dollars 211,590,204, of which 18 per cent. was devoted to communicable diseases and 31.6 per cent. to strengthening of the health services. It had a permanent staff of over 5,000 (including regional offices in Copenhagen, New Delhi, Manila, Alexandria, and Brazzaville, and in conjunction with the Pan-American Health Organization in Washington, D.C.). Also each year WHO engages about 6,500 consultants and temporary professional staff, including interpreters, translators, and précis writers. It also awards some 4,000 Fellowships to enable health workers to study in other countries.

The sexually transmitted and allied diseases are covered in less than 500 words (including only 50 for the endemic treponematoses) which—after indicating that few physicians today ever see any of the serious late manifestations of syphilis—define the venereal diseases as 'problems of health organization and sociology rather than of gross pathology, although some major scientific problems remain unsolved'. The greatest of the latter is to devise a method of conferring some sort of immunity against syphilis and gonorrhoea, 'and in this effort WHO is playing a leading role'.

The profound changes that have taken place since WHO was founded have not left the Organization unaffected in its attitudes and it is believed that the end has now come to 'well-intentioned international technical paternalism in health and its replacement by an era of international collaboration and cooperation' . . . WHO staff and consultants 'are expected to get things done as "honorary nationals" and then to get out'.

R. R. Willcox